PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| L | | Е | ffective D | ecember 8, 2 | 2004 10 | JAN 2007 | 10 | 0/2 | 7953 | 9 |
|--------------------------|--|---------------------------------|------------------|----------------------------------|------------------|---------------------|------------------------|------|---------------|------------------------|
| | | CLAIMS | | D - PART I | (Column 2) | SMALL ENT | гітү | OF | OTHER SMALL | |
| U.S. NATIONAL STAGE FEES | | | | | | RATE | FEE | 7 | RATE | FEE |
| BASIC FEE | | | | | | BASIC FEE | | OR | BASIC FEE | - |
| EXAMINATION FEE | | | | | | EXAM. FEE | | 1. | EXAM. FEE | 300 |
| SEARCH FEE | | | | | | SEARCH FEE | | 1 | SEARCH FEE | 200 |
| FEE FOR EXTRA SPEC. PGS. | | | n | ninus 100 = | / 50 = | X \$ 125 = | | 1. | X \$ 250 = | K400 |
| TOTAL CHARGEABLE CLAIMS | | | 2 | minus 20 = . | | X \$ 25 = | | | | |
| INDEPENDENT CLAIMS | | | 1 | minus 3 = * _ | | X \$ 100 = | i | OR | | ļ |
| MUL | TIPLE DEPEN | IDENT CLAIM PF | RESENT | | | ┨ ┠ ─── | | OR | | |
| | | | | ero, enter "0" in | column 2 | + \$ 180 = | | OR | + 555 | |
| | | | | | COMMINZ | TOTAL | | OR | TOTAL | 90D |
| | | (Column 1) | AMENDE | Column 2 | (Column 3) | SMALL EN | ITITY | OR | OTHER SMALL E | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSL PAID FOR | CVIIV. | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | TOTAL ADDIT. FFF | | ÓR | TOTAL ADDIT. | |
| | T | (Column 1) CLAIMS | T | (Column 2) | (Column 3) | | | - | ree | |
| 2 | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | ADDI- FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = . | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | TOTAL ADDIT. | | | | | | | OR 1 | OTAL ADDIT. | —— |
| | | | | | | rrr l | I | | FFF L | |
| * | If the entry in colu | mn 1 is less than the | e entry in colum | n 2, write "0" In colür | mn 3. | • | | | | |

^{&#}x27;IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.